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## \*BIBDATASHEET\*

CONFIRMATION NO. 7382

Bib Data Sheet

SERIAL NUMBER 10/003,153	FILING DATE 11/02/2001  RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. EN11343
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

Non K.R

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

No PAe K.R

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/28/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GA	4	14	1
Verified and Acknowledged	Examiner's Signature <i>K.R.</i>	Initials <i>K.R.</i>			

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## TITLE

Speakerphone Accessory

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